# PERMANENT MEMBERSHIP RECORD

Do not make carbon copy of this record - Print all four forms with ink - Do not type.

Chapter Alpha	School	University	of Nebi	aska
DATE OF INITIATION Ma	y 6, 1965	MEMBERSHIP (Activ	e or Alumnus)Ac	tive
Name Corcoran Last Name	Paul First Name	Thoma	Chapter Number	2/32
College address 3100 Til	ien Cx. Lin	com Nebr	ne General Number	34598
Home address R + # 2 Street	St, E	durand Neb	YZip Code	
ACTIVE MEMBER Data: B.S. De	egree in Agricul	fural Eng	imeering	(
ALUMNUS MEMBER Data:				
B.S. Degree in	Course	School	1	() Year Received
M.S. Degree in	Course	School	I	() Year Received
Ph.D. Degree in	Course	School	l	() Year Received
Date of Birth Nov 6, 194	4 Place of Birth	St. Ed	ward, N	ebraska
Name of Parent or Guardian	Corcoran Last Name	Leo First Name		State Lomas Iddle Name
Address of Parent or Guardian	りょせつ	St. Ed	ward	Nebraska
Joh J TD 22	Street 3/	City	Glenna ?	State Lew by
Chapter Historian		Date Signed	Chapter Pre	sident

Chapter President will collect from Candidate the following amounts before initiation:
Shingle: \$1.00; Key: \$3.85; Pyramid (2 years): \$4.50; National Records: \$8.15; Total: \$17.50.

IGMA	TAU	FRATERNITY	-
PERMA	NENT ME	MBERSHIP RECORD	

DO NOT WRITE IN THIS SPACE

Chapter Number 741

General Number 42300

Do not make carbon copy of this record-Print all four forms with ink.

Date of Birth 5 MA	R 1850
EN	der
- ~	
	ARCHIE
T./	Middle Name
X	75205
EW State	Zip Code
State	75601
Sale	Zip Code
il be granted)	Year of Graduatio
eer)	Teat of Graduation
eer)	
eer)	··········· (
eer)	··········· (
School	Year Received
eer)	Year Received
1	State  TX  State  TX  State  It was granted)

Chapter President will collect from each Candidate before initiation a fee of \$18.50 which shall include the cost of the key, the membership certificate, the Pyramid (2 years) and general service expense.

# - to the National

# SIGMA TAU FRATERNITY

# PERMANENT MEMBERSHIP RECORD

Do not make carbon copy of this record - Print all four forms with ink - Do not type.

		School KAN SAS	STITE A		
Last Name	The state of the s	6/4	PANCIO		/
College address /650 Street  Home address Street	6 * 1	City TIPTON	KANSAS State	General Number	40913
ACTIVE MEMBER Data: B.S. D	egree in MECI	City  HANICAL E	State	Zip Code	
ALUMNUS MEMBER Data: B.S. Degree in		course (in which degree	e will be granted)	***************************************	(DEC. 197/ Year of Graduation
M.S. Degree n	Course	***************************************	School	***************************************	( Year Received
Ph.D. Degree in	Course		School	*******************************	(Year Received
ate of Birth JAN 6, 19	949 Place of Birt	h	School	*******************************	Year Received
ame of Parent or Guardian	CORDEL	EDM	City	Sta	ANSAS Ite
			TIDTALL		ARLES e Name ANS
Chapter Historian	uly.	Date Signed  Ving amounts before initial	Low	7, Fleske Chapter Presiden	te

# 3-3

Chapter Lombda Insti	tution University	of Hansas Date	Nov. 25, 1941
Please print name.			_
Jame Cordell	James	Clair Chan	pter Number 598
Last Name	First Name	Middle Name	pter Number
college address/424 Kentuc Street	ty Lowrence	, Kansas Gene	eral Number 9690
Iome address	Gardner	Wa	MBERSHIP: Active Honorary
Street	City	State	Strike out one
ourse Petroleum	Eng. Class 1942	Date of Initiation De	ec. 9 1941 Approximate
ate of Birth Feb. 29, 19	920 Place of Birth	Gardner	Hon 505
arent or Guardian's Name	Cordell	J05	eph
	Last Name	First No	ame
arent or Guardian's Address	***************************************	Gardner	Kansas
Dones M. M.	Street MUSINSEI	City	ed C. Lee
Chapter Historian o not write below this line.			Chapter President
hapter President will collect from	Candidate the following amo	ounts before initiation:	
	c = 00	E4 00	\$4.00

Hall, University	records
, 204 Bancroft Hall	nermanent
20.	enter
Tau Fraternity,	for the Ch
Tau	Augo
Sigma	athita
\$	4
y filled in to Sigma 7	ratifica
FOUR FORMS-Completely	Lincoln, Nebr. 68508.
d ALL FO	ebraska, 1

DO I	TON	WRITE	IN	THE	SPACE
------	-----	-------	----	-----	-------

Chapter Number 27/3

General Number 433/8

# SIGMA TAU FRATERNITY

# PERMANENT MEMBERSHIP RECORD

Do not make carbon copy of this record-Print all four forms with ink.

Chapter ALPHA	School UNIUC	rsity of i	ners.
DATE OF INITIATION 7 DEC		ate of Birth &	PRIU 1951
Name COSTOU	THOM:	A5	JAMCS Middle Name
College address 1703 C	Lyneoun	NEISH.	68500 Zip Code
Home address BOX 392	BROKEN 30	W MCBA	
ACTIVE MEMBER Data: (Undergraduate a	TRATILIZE.		, 1974
	Course (in which degree will be or Course (in which degree will be		Year of Graduation  ( Year of Graduation
ALUMNUS MEMBER Data: (Engineering	faculty or practicing engineer)		
Bachelor's Degree in	***************************************	School	Year Received
Master's Degree in		School	Year Received
Doctor's Degree in		School	Year Received
James F. Mallatt	NOV 6 1972	******* **************************	Wewhouse
Chapter Discolan	Date Signed	Clie	Prov. a regionalis

Chapter President will collect from each Candidate before initiation a fee of \$18.50 which shall include the cost of the key, the membership certificate, the Pyramid (2 years) and general service expense.

closedo Daro April 24, 196.
Middle Name Chapter Number 1849
Colorado General Number 35558
State Strike out one
Initiation date May 22, 1964
City Texas
Jack First Name
Houston, Texas
Alfred M. Sanders
Chapter President

Chapter SIGMA Institut	ion OKLA. A	EM COLLEGE Dat	· Nov. 3, 1941	<b>!</b>
Please print name			0.	~
Name CORDER Last Name	John First Name	Dwight Cha	ipter Number 80	8
College address 462 CORDE	LL HALL, SE	Muster OKLA Ger	neral Number $1389$	12
Home address(III#	PutNAM	OKLA MEM	IBERSHIP: Active, —I	Tenerary out one
Course ELECT. ENGR,	Chass 1950 Year of Grade	Date of Initiation	Vov. 17, 194 Approximate	1
Date of Birth APril 13, 1948	Place of Birth	PutNAM,	OKLA.	
Parent or Guardian's Name	ORDER.	Mrs.	PAY First Name	
Parent or Guardian's Address	K -	YU TNAM.	, OXLA	^
Chapter Historian Do not write below this line.	******	fon	Chapter President	ch.
Chapter President will collect from Can-	didate the tologing amo	ounts before initiation:  S4.00	Initiation \$4	.00
	On not make carbon so	py of this record.—Print all	forms with ink.	

	MINIMA	HIP RECORD
Chapter Eta	nstitution Washington	State University Date December 8, 1961
Please print name		
Name Cowder III	John First Name	Middle Name Chapter Number 1312
College addressKrueael	(a)) Pullman	Washing Ton General Number 30721
Iome address 1523 Hai	ns Richland	Was hing Tommembership: Active, Alument State Strike out one
Bourse Physical Me	tallurgy (19	6? ) Initiation date December 20, 1961
f alumnus, give University and	degrees	
Date of Birth November 29,	1961 Place of Birth	Kansas City Missouri State
arent or Guardian's Name		
arent or Guardian's Address	1523 Hains	Bichland Washington
Louis Nihou	Street	Doug teacock
Chapter Historian Do not write below this line.		Chapter President
Chapter President will collect fro	om Candidate the following ar	nounts before initiation:
		Pyramid Initiation Initiation

## MEMBERSHIP RECORD

	MINITERISM	r recomb	
Chapter LAMBDA II	stitution UNIVERSIT	Y OF KANSAS Date	4-30-56
Please print name			
		Middle Name Chapte	_
College address 12 46 W Street	campus Low reu	CY State General	Number 23434
Home address 2/2 N	Hart MEAD	E IT ANSASMEMBE	RSHIP: Active, Alumni-
Course Engeneer Pl	1951CS (195 Year of Gre	8) Initiation dateM.	y 9, 1956
If alumnus, give University and			
Date of Birth 26 Mag		City	State
Parent or Guardian's Name	Specht Last Name	Lewis	: Name
Parent or Guardian's Address  Chapter Historian	Street	City	State State Ohapter President
Do not write below this line.			U
Chapter President will collect from Shingle 75c		A 1 - A	stiation \$5.00

Permanent record.-Do not make carbon copy of this record.-Print all forms with ink.

MEMBERSHIP RECORD
Chapter Lambda Institution Kansas University Date Nove 14, 1961
Please print name
Name Cordill Robert Locin Chapter Number 1753 Last Name First Name Middle Name
College address 1425 Tennessee, Lawrence, Kansas General Number 30660 Street City, Lawrence, Kansas General Number 30660
Home address 2034 Lane, Topeka, Kansas MEMBERSHIP: Active, Alumni Strike out one
course Engineering Physics ( 1962) Initiation date Dec. 6, 1961
If alumnus, give University and degrees.
Date of Birth Nov. Z, 1940 Place of Birth Pawnee City, Nebraska
Parent or Guardian's Name Cordill Oliver  Last Name First Name
Parent or Guardian's Address 2034 Lane Topeta Kansas Street Stuart bagge  State  State
Student Dauger Chapter Historian Do not write below this line,  Chapter President Chapter President
Chapter President will collect from Candidate the following amounts before initiation:
Shingle Pyramid Initiation Permanent record.—Do not make carbon copy of this record.—Print all forms with ink

	•	IP RECORD	
Chapter Tota	Institution Outversity	of Colorado Date	November 12,1951
Please print name			
Name Covelingly	Richard First Name	Henry Chap	ter Number 1010
		Colorado Gener	
Home address 630 E. Co. Street	ombia Colorado Spr	ings Colorado MEMB	ERSHIP: Active, - Honorary- Strike out one
		Date of Initiation	
Date of BirthAugust 9, 19	131 Place of Birth.	Denver	Calarado
Parent or Guardian's Name	Cordingly Last Marge	Fig	Ralph rst Name
Parent or Guardian's Address	630 E Columbia	Colorado Spri	ug Colorado State
Chapter Historian Do not write below this line.			Chapter President
Chapter President will collect fr	om Candidate the following amo	Pyramid	\$4.00
Shingle75c	Key TOW -	Pyramid1	nitiation
Permanent re	Total \$6.00	py of this record.—Print all for	ms with ink.
	Idiai poloc		

		HP RECORD	
hapter Alpha Dolfa in	stitution Utah	State Date	April 18, 1957
Please print name			
ome Cordon	William	Alfred Chapter	Number 206
Last Name	First Name	Middle Name	010+0
illago eddress 43/ West	ALLN LOGA	M CHah General	Number 2400
Street	City	State	
ome address Sound		State MEMBE	RSHIP: Active, Alumni Strike out one
ourse Civil Engine	Year of G	35) Initiation date. Apr.	11 18, 1957
alumnus, give University and	degrees		
ate of Birth. May 2, 19	23Place of Birth	Rigby	Idaka
	Cardon	O <sub>M</sub> First	der-
arent or Guardian's Name	Last Name	First	Name
		Righy	
arent or Guardian's Address	Street	Olty	State
BLAIR HARRIS	ON	ROSS	DOWMAN
Chapter Historian			Chapter President
o not write below this line.			
hapter President will collect from	n Candidate the following ar	nounts before Minaus HTTON	TOTAL ALL ITEM
hingle		3 YEARS	itiation \$17.50
		copy of this record.—Print all form	ns with ink.

Chapter officers will send all three forms, properly filled in, to the National Secretary-Treasurer as soon as possible after election. The National Secretary-Treasurer will return the white sheet for the Chapter records. For full instructions see the inside cover of the record book.

	-	HP RECORD	
Chapter Tote	Institution Oulversity	of Colorado Date	November 12, 1951
Please print name			
Name Coydingly	Richard First Name	Henry Chap	ter Number. 1010
	_	Colovado Gener	
Iome address 630 E. Co	lambia Colorado Spr	ings Colorada MEMB	ERSHIP: Active, — Honora- Strike out one
CourseChemical Engis	cering Class 1953 Year of Grad	Date of Initiation	Approximate
Date of Birth August 9,	931 Place of Birth	Denver	Colorado
Parent or Guardian's Name	Cordingly Last Harge		Ralok rst Name
Parent or Guardian's Address	630 E Columbio	Colorado Spri	ing Colorado
Chapter Historia Do not write below this line.			Chapter President
Chapter President will collect	from Candidate the following am	ounts before initiation; 00	\$4.00
Permanent r	ecord. Lax make carbon co	Pyramid	nitiation ms with ink.

Please print name			
Name Cordner	Wolker	Minford	Chapter Number 6/8
		S) CHILLIAN	General Number 5480
Home address	le 31 street, Lincoln	Nebraska State	MEMBERSHIP: Active Honoral Strike out one
			December 6,1933
Date of Birth Sunc 1,1	9/3 Place of Birth	Duluth	
Parent or Guardian's Name			State
	Last Name	සිම්මිල්ල සැමුමුම්ම මෙය සෙම සිරල සියල් මියල් මෙය සංවර වෙන සම්බන්ධ වෙන විද්යාවේ සියල් සියල් සියල් සියල් සියල් ස	First Name
Parent or Guardian's Address			
Viito	i Chap	City	Richard Bulge
Chapter Historia.		***************************************	Chapter President
2.0	from Candidate the following a	mounts before initiation:	#4
		-PLEASE PRINT WITH INK	AUIUAUOD

MEMBERSHIP RECORD

hapter Alpha Dolla	Institution Utah	State Date	April 18, 1957
Please print name			
ame Cordon	Hillain	Alfred Chap	ter Number 206
ollege address 431 M	est AUN Logo	an CHah Gene	ral Number 24652
		State A	
ourse CIVIL Eng	rincering Your of	Graduation of Graduation of Graduation	25.1.1.1.2.j.1.9.5.7
alumnus, give University	and degrees	***************************************	
ate of Birth. May 2	1913 Place of Birth	Righy	I daka
arent or Guardian's Addre	888,Street	Pigby	State
BLAIR HAR	RISON	Ross	BOWMAN
Chapter Histo Oo not write below this lin	rian 8.		Chapter Fresteint
hapter President will colle	ct from Candidate the following a	amounts before SLIBSOBIFTION  3 YEARS	TOTAL ALL ITEMS

Chapter officers will send all three forms, properly filled in, to the National Secretary-Treasurer as soon as possible after election. The National Secretary-Treasurer will return the white sheet for the Chapter records. For full instructions see the inside cover of the record book.

Chapter Mu	Institution University o	f Oklahoma	Date Oct 17, 1	940
Please print name.		F., .		644
Name CORDRA	4 Austin	Edwin Middle Name	Chapter Number	011
Last Name	First Name	0///		9054
College address /0/	TRout Norman	OKlahom State	General Number	
Home address Box	#5 Helena	Oklahome State	2MEMBERSHIP:	Active Hencresy Strike out one
Course Peteo leur	n Engineer Class 1942 Year of Gradue	Date of Initiation.	Nov 23 15	740 Imate
		Helena		n a State
Parent or Guardian's Na	a de au	<i>U</i>	First Name	
Parent or Guardian's Ad	R #-	Helena	Ok	lahoma
Stellen Q!	Denton	City	Man F. B. Chapter Presiden	state  SWELS  it
Do not write below this l	ine.			
Chapter President will o	collect from Candidate the following an	mounts before initiatio	1:00 \$4	.00
Shingle 50c	Key \$5.00	Pyramid.	Initiation	

Please print name.			933
CORDRY,	BURTON	LLOYD Ct	napter Number 933
Last Name	First Name	TII	maral Number / 2 2 7 5
llege address Annex A	1311, City	State	SHOTOL MILLION CO.
ome address P.O. Box	485 Hann	ba/ Nate	EMBERSHIP: Active, Henerary Strike out one.
ourse Electrical	Eng. Class 194	8 Date of Initiation	29 Approximate
ate of Birth 2 June 1	943 Place of Birth	St. Louis	MISSOUTI Blate
arent or Guardian's Name	CORDRY		NEVA
arent or Guardian's Name	Last Name		/ AAA
arent or Guardian's Address	P.O. Box 485	Hanniba	State
		France	Chapter President
Chapter Historian	eneger		Chapter President
o not write below this line.			
Chapter President will collect from	Candidate the following amo	ounts before initiation: \$4.00	\$4.00

# PERMANENT MEMBERSHIP RECORD

Do not make carbon copy of this record - Print all four forms with ink - Do not type.

Chapter Mu	- S	school Oklas	homa Uni	versity	
DATE OF INITIATION	Dec. # 19.	69 MEME	SERSHIP (Active or	Alumnus) Ac	tre
Cara	Melan		Allen	Chapter Number	2279
Last Name	First Name	Norman	Middle Name	General Number	29941
College address 500 E Line Street Home address 1203 Grandvik		Pauluska	State Okla	74056	3 2 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
Street	0	City	State	Zip Code	1 1971
ACTIVE MEMBER Data: B.S. Deg	gree in		Segree will be granted	)	Year of Graduation
ALUMNUS MEMBER Data:					()
B.S. Degree in	Course	***************************************	School	,	Year Received
M.S. Degree in	Course	*******************************	School	***************************************	Year Received
Ph.D. Degree in	Course		School		Year Received
Date of Birth Aug. 4, 1948	Place of Bir	th	Tulsa		Okla- State
1	Coke Last Name		Melviu First Name		Frederick liddle Name
Address of Parent or Guardian	- 1	ew // 9	Pauhusta	) -	State A
Brucoff. Wolf	4	Date Signed	410410000000000000000000000000000000000	Chapter Pre	J Sww L

Chapter President will collect from Candidate the following amounts before initiation:
Shingle: \$1.00; Key: \$3.50; Pyramid (2 years): \$3.00; National Records: \$11.00; Total: \$18.50.



Please print name	TRANSIS		or Number 143
Last Name	First Name	Middle Name	25583
llege addressStreet	City	State	al Number
ome address 2408 Street	MARY PEN	P MEMB	ERSHIP: Active, Alama Strike out o
ourse		59 Initiation date	DEC 57
	Year of	Graduation	
alumnus, give University	and degrees		
4/2/2	Managed Digith	750	1 A
te of Birth	Place of Birth	City	State
	Capet	TRAN	ie J
rent or Guardian's Name	Last Name	71	rst Name
	SAME		
rent or Guardian's Addres	Street	City	State
1) (1 -M-	to a	Game	2 Satte
1 one to			Chapter President
Chapter Historio not write below this line.	2 W /1		

# PERMANENT MEMBERSHIP RECORD

Do not make carbon copy of this record - Print all four forms with ink - Do not type.

May	6, 1965	MD.	MBERSHIP (Active or	Alumnus) ASTA	
<b>.</b>	Fred		Carter	Chapter Number	2/33
ne .	First Name	th	Middle Name	Conord Number	34577
STREET					90 9 May 90 a May 400   Tan 0 0 1 May 64 64 600
Route #	4.;	M Cook City	, Nebr State	69 50 0 Zip Code	
ta: B.S. Degree	in	course (in whi	ch degree will be granted	1)	Year of Graduation
Data:					. (
	Course	9#9### 0020919#######	School	4500	Year Received
***************************************	Course	m rod + a	School	3/4.27:12.48/9.25.77**********************************	Year Received
	Course	***	School		Year Received
24, 1943	Place of B	irth	Mccook.	Nebro	ska State
,	Comon		Farl	Fran	
ıardian	Last Name	o-magad s = ଓ ଲକ୍ତମ୍ନ ବନ୍ୟନ ବିଷ୍ଟି ଓ ବିଷ୍ଟି । ଅଧିକ ମଧ୍ୟ ବିଷ୍ଟିକ ଶିଟ	First Name	Nebraska Mi	ddle Name
֡֡֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜	2.3.4.5 Street  Route # Street  ta: B.S. Degree  Data:	Fred First Name  2345 South 34  Street  Route # 4  Street  ta: B.S. Degree in  Course  Course  Course  Course	First Name  2345 South 34th; Lincoln Street City  Route # 4; McCook Street City  ta: B.S. Degree in Course tin whi  Data:  Course  Course  Course  Course  Course  Course  Course	First Name  First Name  Street  Street  Route # 4: McCook  Street  City  State  Route # 4: McCook  City  State  Course (in which degree will be granted  Course  Course  Course  Course  School  Course  School  Course  City  City  Course  School  Course  Course	Route # 4 McCook Nebr. G9500  Street City State Zip Code  ta: B.S. Degree in Civil Engineering  Course (in which degree will be granted)  Course School  Course School  Course School

Chapter President will collect from Candidate the following amounts before initiation:
Shingle: \$1.00; Key: \$3.85; Pyramid (2 years): \$4.50; National Records: \$8.15; Total: \$17.50.

Chapter Alpha Alpha Institu	tion Colorado A	1 & M	Date 20 Jan1947
Piesse print name.  COREV  Last Name	Gilbert	Lee	Chapter Number 150
College address Z 2 7 Peter.	som Ft. Collins	222000 210000	
Home address Box 43	•		
Course Civil Engineeri			_
Date of Birth 7 Feb. 1923	Place of Birth	Olathe	Co/a.
Parent or Guardian's Name	Corey Last Name		Gilbert First Name
Parent or Guardian's Address	Box 43 Street	Olothe	Co/o Biate
Chapter Historian  On pot write below this line.	The state and th		Chapter President
Chapter President will collect from Ca 50C Shingle Key	\$5.50	onts before initiation:  S4  Syramid S4  by of this record.—Print	.00 \$4.00

Chapter	Zeta	Institution	Crep on	Ptate	Date Oct. I, I	18 <b>0</b>
Name	Corey Corey	enn bev	vis		Chapter Number	00062
College Addres	Street.	City.	rst Name.	State.	General Number	72
Home Address	Here Many Or	City.	प्रभावता पूर्व प्रकृतको प्रक्षी क्ष्मी कृत कुछ प्रकृत की की का का १	State.	Membership Strii	Active Honorar to out one.
Course	Cla	Year of Gr	aduation.	Date of Initiation	Approximate	1913
Date of Birth _	and if I can can day than too 0 P the all 0 P the area of the state of	Place of B	irth	on, chadiana	State.	, इ.स.च्या १९ १० च्या प्रश्ना तक तक व्यक्ति प्रश्नी प्रश्ना प्रश्नाचे न प्रश्ना तक व्यक्त प्रश्ना प्रश्नाची है सी
Parent or Guar	rdian's Name	Last Name.	Corey,	To Be	First Nam	, are the a t are achieve his sett a to see seem to ten an accept about his
Parent or Guar	rdian's Address	Street.	Busi R	toor, Orechy.		
	Chapter Historian		gas ag min n		4	er President.
	urer will collect from					

# PERMANENT MEMBERSHIP RECORD

Do not make carbon copy of this record -- Print all four forms with ink -- Do not type.

Chapter Alpha A	lphq s	ichool Q 3 (	1	>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>	· · · · · · · · · · · · · · · · · · ·
DATE OF INITIATION F. F.	6. 70	MEMBER	SHIP (Active or	Alumnus)	file
Name Corey	Phi line		Middle Name	Chapter Number	573
College address	Shields	FY Collins		General Number	440305
Home address L6 20 51, W	lest com b	Ff. Collins	Qr/s State	Zip Code	
ACTIVE MEMBER Data: B.S. Deg	ree in Med	Lage Course (in which deg	ree will be granted		( / Z/ ) Year of Graduation
ALUMNUS MEMBER Data:					
B.S. Degree in			0-11	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	. ()
	Course		School		Year Received
M.S. Degree in	Course		School	***************************************	Year Received
Ph.D. Degree in	Course	• • • • • • • • • • • • • • • • • • • •	School	**************************************	Year Received
16.11		6			/ear neceived
Date of Birth	Place of Birt	h Sectemen	<b>173</b>		it place
Name of Parent or Guardian	Cs - 27 Last Name	A+ )	Hunger City		Thomas Marie
Address of Parent or Guardian	1628 50	Whitcoms	s FI. Gh	the op	60.
Thomas a But	Street	Jun 15,	1470 City (	John W	State
Chapter Historian		Date Signed		Chapter Presi	dent

Chapter President will collect from Candidate the following amounts before initiation:
Shingle: \$1.00; Key: \$3.50; Pyramid (2 years): \$3.00; National Records: \$11.00; Total: \$18.50.

Please print name		_	
Name CORFIE	LD GEORGE	TREFFRY Cha	pter Number 500
Last Name	First Name	Middle Name	(1) (1) (1) (1) (1)
ollege address 2524 AU	SO DR ALBUQU	ERQUE N.M. Gen	eral Number
	·		
Iome address.	Gitz Con (ENA)	/ B.C. CANADIT MEN	BERSHIP: Active, Alumnit
		755 ) Initiation date	
/V UI OC			
	Year of	Graduation	
	Year of	Graduation	
f alumnus, give University and	Year of degrees	Graduation	***************************************
f alumnus, give University and	Year of d degrees	Graduation  CMCX 5. C. C.	ANA DA
f alumnus, give University and	Year of d degrees	Graduation  CMCX 5. C. C.	ANA DA
f alumnus, give University and Date of Birth.	Year of d degrees.  77   Place of Birth.  (* C' RF IEL.  Last Name	Graduation  CMCX  City  City	State  State
alumnus, give University and Pate of Birth.	Year of d degrees.  979 Place of Birth  CREIEL  Last Name  PC BCX 429	Graduation  CMCX  City  City	State  State
ate of Birth. MAY Sarent or Guardian's Name	Year of d degrees.  77   Place of Birth.  (* C' RF IEL.  Last Name	Graduation  CMCX 5. C. C.	State  State
alumnus, give University and Pate of Birth.	Year of d degrees.  979 Place of Birth  CREIEL  Last Name  PC BCX 429	Graduation  CMCX  City  City	State  State  B.C. C.N.A.
ate of Birth	Year of degrees.  778 Place of Birth.  C C RF IEL  Last Name  P. C Box 229  Street	CAMCX B.C.C.	State  State  State  State

Corfield

# SIGMA TAU

# MEMBERSHIP RECORD

-				
Name Corfield	George	Walter	hapter Number / C	d
Last Name	First Name	Middle Name	O.º	COMIC
College address 327/2 W 6	TH Rens	Wevada	eneral Number	1978
				•
Home address Street	City	State	1	ve, Abbestori Strike out one
course/Mining Engin	ecrina 195	Initiation date	14 Dec. 57	
	Year of G	raduation		4.9
f alumnus, give University and deg	rees	*****	*****************************	
		. /		_
	D''	4 A 4 A A A	La 11 Laura	· 🙍
Date of Birth.	Place of Birth A.A.	CUSIC REC	Otaca	
Date of Birth 22/11/34	Place of Birth A.A.	City	State	
Parent or Guardian's Name	Place of Birth	City	State  Mal Tew	- 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Parent or Guardian's Name	int Name		First Name	) hijiyy ngara didiki ili iliy a di iliya a ji
Parent or Guardian's Name	int Name		First Name	) hijiyy ngara didiki ili iliy a di iliya a ji
Parent or Guardian's Name	Inst Name  RT 1 Box 90  Street		First Name	) hijiyy ngara didiki ili iliy a di iliya a ji
Parent or Guardian's Name.  Parent or Guardian's Address.  Ourse W. Williams	Inst Name  RT 1 Box 90  Street		First Name  State  Stat	) hijiyy ngara didiki ili iliy a di iliya a ji
Parent or Guardian's Name	Inst Name  RT 1 Box 90  Street		First Name	) hijiyy ngara didiki ili iliy a di iliya a ji

Permanent record.-Do not make carbon copy of this record.-Print all forms with ink.

# and completely filled in -- to the National

# SIGMA TAU FRATERNITY

# PERMANENT MEMBERSHIP RECORD

Do not make carbon copy of this record - Print all four forms with ink - Do not type.

Chapter SIGMA		School OKLAID	M STATE		
DATE OF INITIATION	APRIL 6,	1966 MEMB	ERSHIP (Active or	Alumnus) Oc	tre
		PD me	10 000	Chapter Number	_
Last Name College address 1308 W	THIPD	STILLWATE	R OKLA	General Number	35400
Home address 3550 C		DALLAS.	State TEX.	7-4-75	
ACTIVE MEMBER Data: B.S.	Degree in APL	WITELTURE Course (in which	degree will be granted	i)	(1968) Year of Graduation
ALUMNUS MEMBER Data: B.S. Degree in			•		. (
D.S. Degree III	Course		School		Year Received
M.S. Degree in	Course		School	***************************************	Year Received
Ph.D. Degree in	Course		School		Year Received
Date of Birth OCT. 8	15 Place o	f Birth PALLAS	City	Tex	AS State
Name of Parent or Guardian	CORGAN Last Name	J	ACK First Name	MV	
Address of Parent or Guardian		UTH	PALLAS	7	XAS,
Earl Schalle Chapter Historia	abey	Date Signed		Teny Col	dent
Chapter President will collect	from Candidate th Shingl	e following amounts bege: \$1.00; Key: \$3.85; Pyr	fore initiation: amid (2 years):	50; National Records:	*8:18; Total: *17.8 10.05; \$18.50

# PERMANENT MEMBERSHIP RECORD

Do not make carbon copy of this record - Print all four forms with ink - Do not type.

DATE OF INITIATION Ma	y E, 1965	MEMBERSHIP (Active or	r Alumnus) Ac 1	1,ve
Name Corgill Last Name College address Sireet	Eric First Name none	Middle Name  City State  Lewisville Texa	Chapter Number	609
		al Engineering		( 1965 Year of Graduation
ALUMNUS MEMBER Data: B.S. Degree in	Course	School		Year Received
M.S. Degree in	Course	School		Year Received Year Received
Name of Parent or Guardian.  Address of Parent or Guardian	Course  1938 Place of Birth  Congill  Last Name  P.O. Box 533  Street	Cottle County  Reuben  First Name (Bladeverth St.) Class  City	Hen Mi Te	State  SOM  iddle Name  XAS  State
Chapter Historian		4-20-65 Date Signed	Chapter Pres	ident

Chapter President will collect from Candidate the following amounts before initiation:
Shingle: \$1.00; Key: \$3.85; Pyramid (2 years): \$3.00; National Records: \$10.65; Total: \$18.50.



Please print name.			
Name	THOM O,		0004+
NameG Last Name.	Pinet 32	· · · · · · · · · · · · · · · · · · ·	Chapter Number 00017
College Address	Tillat M	ime.	Manual Ma
College Address	City.	State.	General Number 679
Street.	City	etland Ore-	- Membership
Course Class Class	19	State.  Date of Initiation	Strike out and
Date of Birth	Year of Graduati	on.	Approximate
Parent or Guardian's Name		City.	san an a
Las	st Name.		
Parent or Guardian's Address			First Name.
	Street.	***************************************	
		City.	State.
Chapter Historian.	₩ m m.m.		o and and also also are one associated and also also also also also also also also
Do not write below this line.			Chapter President.
hapter Treasurer will collect from Can	Allocate the second	- Andrew Control of the Control of t	to the district of the contract of the contrac
hingle Key	ate the following	Amounts before initiation.	



# Chapter officers will send all four forms — property and completely filled in — to the National Secretary-Treasurer as soon as possible after election. The National Secretary-Treasurer will return the white form for the Chapter's permanent records.

# SIGMA TAU FRATERNITY

# PERMANENT MEMBERSHIP RECORD

Do not make carbon copy of this record - Print all four forms with ink - Do not type.

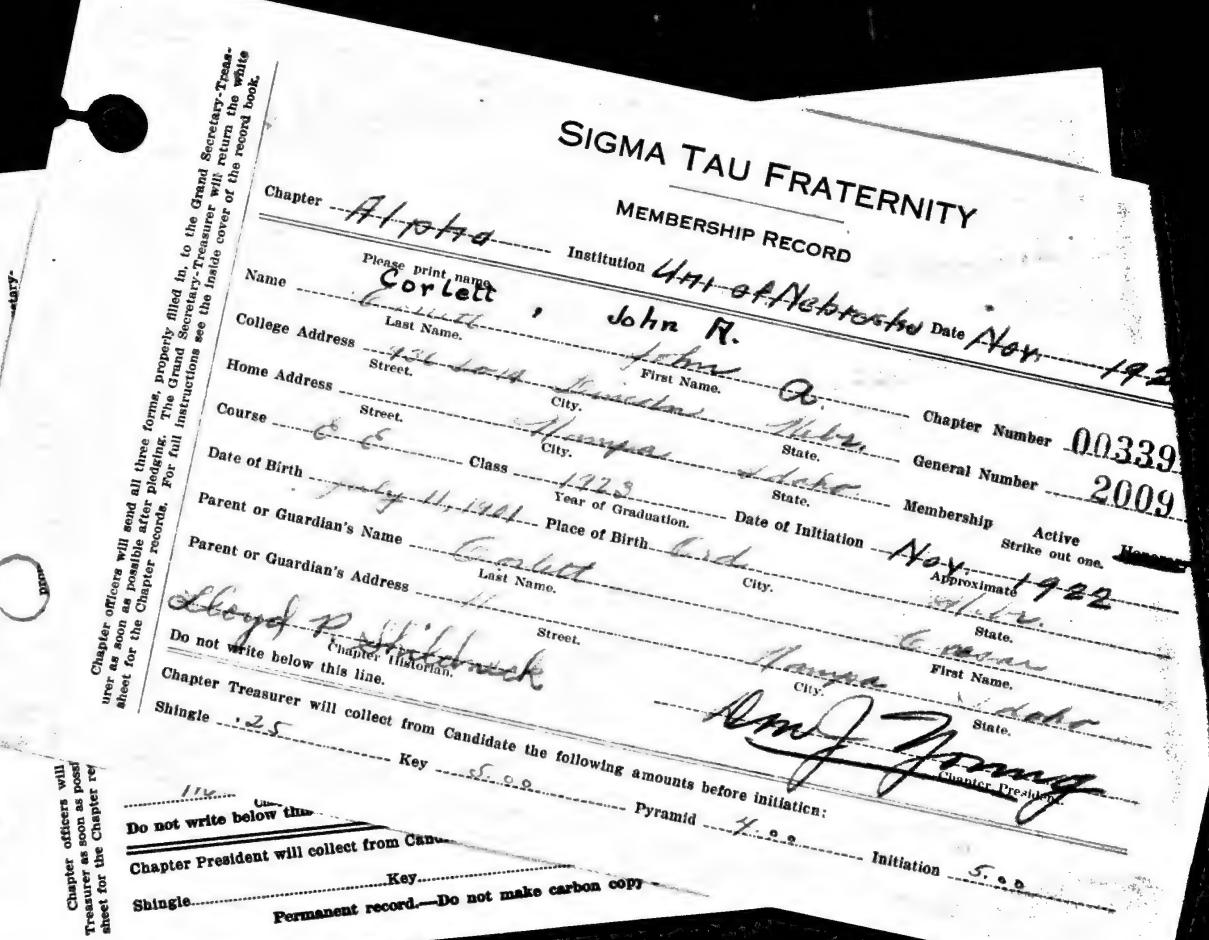
Chapter <i>ETA</i>	Scho	ol Washing	ton State	Universit	<u>J</u>
DATE OF INITIATION	Dec 8 19	66 MEMBERSI	IIP (Active or Alur	nnus) Acti	ve
Name Corkrum Last Name	Donald First Name	L	Middle Name	apter Number	
College address 105 College Street	eye Ave. Apt. #/	City	State	neral Number 3	67-4/
Home address 105 Colle	ge Ave Apt. =1	Pullman W	state of	Zip Code	
ACTIVE MEMBER Data: B.	S. Degree in Me	chanical Course (in which degree	Engineering		/968 ar of Graduation
ALUMNUS MEMBER Data:					
B.S. Degree in	Course		School		Year Received
M.S. Degree in	e		School		Year Received
Ph.D. Degree in	Course		School		Year Received
Date of Birth January	, 1946 Place of Birth	Walla	Walla	Washing	ton
Name of Parent or Guardian	/ L	E/m	?	Franc Middle	Name
Address of Parent or Guardi			a Wella	, Washing	ton
Lang Ila	this	11-22.66		cottlet	herten
Chapter Histor	rian /	Date Signed		Chapter President	,

Chapter President will collect from Candidate the following amounts before initiation:
Shingle: \$1.00; Key: \$3.85; Pyramid (2 years): \$3.00; National Records; \$1.00; Key: \$3.85; Pyramid (2 years): \$3.00;

MEMBERSHIP RECORD

Please print name.					1 -
Name Cov	Jol	Name	Louis Middle Name	Chapter Number	621
College address 937	M 36th	Corvallis	Oregon	General Number	1071
Home address -937 Street	H 36th	Corvallis	Oreg on	MEMBERSHIP	: Active Honorar;
Course Electrical E	njineerin	Class 1943 Year of Graduation	Date of Initiation	9ay 13,	943 oximate
Date of Birth Dec. 19	, 1920	Place of Birth W.	16 Walla	Wast	ing ton
arent or Guardian's Name	Corl	Name	Lel	and D First Name	
arent or Guardian's Addre	ss 459	Madison	Corvallis	Or	Shite
Chapter Historic not write below this line				Chapter Presid	ent d
Chapter Histore Do not write below this line Chapter President will collaborate Shingle 50C	ect from Candid	ste the following amo	unts before initiation:	Chapter Presid	\$4.0

PERMANENT RECORD-DO NOT MAKE CARBON COPY OF THIS RECORD-PRINT ALL FORMS WITH INK



Cortett, John R.	touted Date Nov. 1922
Name Last Name. First Name.	Chapter Number 00339
a' ·	General Number 2005
Iome Address	Membership Active T
Class 122 Date of Year of Graduation.	Initiation Strike out one.
Place of Birth 1	Sept of the
arent or Guardian's Name	State.
Last Name.	First Name.
loyd P Shilowick Al	City. State.
not write below this line.	Chapter President.

stitution de OKla State University Please nrint name Active. Alexand If alumnus, give University and degrees..... Parent or Guardian's Name Parent or Guardian's Address. Chapter Aistorian Do not write below this line. Changer President Chapter President will collect from Candidate the following amounts before initiation: ON TUINL ALL ITLING 3 YEARS \$17.50

M

Permanent record.-Do not make carbon copy of this record.-Print all forms with ink.

# PERMANENT MEMBERSHIP RECORD

Do not make carbon copy of this record — Print all four forms with ink — Do not type

Chapter ALPHA GAN		ool NEW MEXI			
DATE OF INITIATION	3-6-66	MEMBERSHI	IP (Active or	Alumnus) ACT	TIVE
Name CORLEY Last Name	WATT First Name	AND	REW	Chapter Number	581
College address P.O. BOX Street	1929 UNIVER	SITY PARK, N	MEX,	General Number	35714
Home address P.O. BOX Street	41 BELEN, A	City MEXICO	State	87002 Zip Code	
ACTIVE MEMBER Data: B.S. 1	Degree in ELECTRI	CAL ENGINE Course (in which degree )	EERING will be granted	EXPECTEN	( 1967 Year of Graduation
ALUMNUS MEMBER Data: B.S. Degree in			School		(
M.S. Degree in	Course		School	·*************************************	Year Received
Ph.D. Degree in	Course		School		Year Received
	75 Place of Birth	ALBUQUERQU	E NE	EW MEXICO	) 
Date of Birth APRIL 5, 19					State
Date of Birth APRIL 5, 19  Name of Parent or Guardian	COCLEY  Last Name	SIONE First Na	me	AU	6457
Name of Parent or Guardian.  Address of Parent or Guardian.		BELEN, NEW	MEXIC	. <i>0</i>	GUST  iddle Name

to the National four forms — properly and completely filled in as possible after election.

\$18.50.

	<del></del>	ESHIP RECORD		
Chapter Theta I	astitution Univer	esity of Illinois	Date Nove	27,1956
Please print name				
lame Cox ex L	Villiam	Gene	Chapter Number	1696
				241111
College address	E. Daniel	Champaign, Ill.	General Number	, 2000
Iome address 2/2 E /				
ourse CIVIL ENGILLS	EK 19 ( )	958 ) Initiation date	Jan 10,	1957
alumnus, give University and				*******************************
ate of Birth Dec. 19.	'935 Place of Birth	Shelburgile	I.	110015
		City	•	State
arent or Guardian's Name	Last Name	J'arance.	First Name	9.11h
arent or Guardian's Address		6 St. Shel		Ille
Boland E. Of	Elimont	City		State
Chapter Historian Do not write below this line.		- far	Chapter Pre	eldent
Chapter President will collect from	n Candidate the following	amounts before in SUBGORIF	TION	TOTAL ALL ITEM
hingle			S Initiation	\$17.50

Chapter officers will send all three forms, properly filled in, to the National Secretary-Treasurer as soon as possible after election. The National Secretary-Treasurer will return the white sheet for the Chapter records. For full instructions see the inside cover of the record book.

Permanent record.-Do not make carbon copy of this record.-Print all forms with ink.

MEMBERSHIP RECORD niversity & Pillsburgh Date -Please print name Chapter Number State 5-49 Home address 411 F. Main St. Grove Cit Active, Hanney Approximate 1918 Place of Birth State Parent or Guardian's Name.... Last Name First Name Lake Parent or Guardian's Address. 200 Chapter Historian Do not write below this line. Chapter President Chapter President will collect from Candidate the \$15.00 mounts before initiation: \$4.00 Permanent record.—Do not make carbon copy of this record.—Print all forms with ink.



MEMBERSHIP RECORD Chapter SIGMA Institution Oldq. A & M College Date Nov. 12, 1941 Please print name. Name Cormack LEEman ... Chapter Number 517 College address 215 N. Knoblock, Stillwater, Otla. General Number 9549

Street City Home address

Street City

Active, Here
Strike out Course Elect. Engr. Class 1972 Date of Initiation Nov. 19 1941

Year of Graduation Approximate Date of Birth Jan 19, 1917 Place of Birth Charleston, Art. Parent or Guardian's Name Cormack Edd Street Charleston Parent or Guardian's Address Chapter Historian Do not write below this line. Chapter President will collect from Candidate the following amounts before initiation: 50c \$5.00 Pyramid \$4.00 Initiation \$4.00 Permanent record.—Do not make carbon copy of this record.—Print all forms with ink.

#### MEMBERSHIP RECORD

Name CRANCH RICHARD HARRISON Chapter Number 1937  Last Name First Name Middle Name  College address 215 BASELINE BOLLOGIA COLOSON Concral Number 3495  Street City State  Home address BOX 88 COLOSON MEMBERSHIP: Active, Artr Strike out State  Course E.E. (1967) Initiation date MOV 12, 1965  If alumnus, give University and degrees Team of Graduation  Date of Birth 15 MAR 1944 Place of Birth DE KALB TLL  Parent or Guardian's Name Colons & State  Parent or Guardian's Address BOX 88 COLOSON State  UNIVERNI GOSHI  Chapter President	Please print name	12	10300		1027
Tome address Box 88 (Cha Social State State Strike or St	lame CORMACH	First Name	Middle Name	Chapter Number	173/
tome address Box 88 (OKO SOS) (OLO BOSO) MEMBERSHIP: Active, Air State  OUT  State	ollege address 2915	BASELINE B.	State	Observal Number	34955
Year of Graduation  I alumnus, give University and degrees  Pate of Birth 15 MAR 1944Place of Birth DE KALB TLL  City State  Carent or Guardian's Name Common First Name  Parent or Guardian's Address Box 88 Composition  State  UNIVERS GOSHI  Initiation date 1000 12 15 5 5 5 6 5 6 5 6 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	Iome address Box 8	8, COLD: Sp65	(OLO 809) State	O MEMBERSHIP:	Active, Alumni Strike out one
Parent or Guardian's Name  Carmock  Last Name  Carol Survey  City  Biate  Parent or Guardian's Address  Street  Covo. Sps.  City  State  Les Besser  Les Besser	ourse E.E.	Year	967 Initiation of Graduation	date NOV 12,	1165
arent or Guardian's Name  Last Name  Last Name  Print Name  Print Name  Parent or Guardian's Address  BOX  Street  COVO. \$\frac{5}{65}\$  Oity  Street  LES  BESSER					
arent or Guardian's Name  Last Name  Last Name  Cono. Sp65  Coto.  Street  Coto.  Street  Coto.  Street  Coto.  Co	ate of Birth 15 MAK	9 1944Place of Birth. L	) EKALB , City	<u></u>	
arent or Guardian's Address BOX 88 COLO State  VINCENT GOSHI  LES BESSER					
VINCENT GOSHI LES BESSER					
Charles Barrier			City		tate
Curbet, transfer	Chapter Histor	ian	#9.004#		ident
o not write below this line.  Chapter President will collect from Candidate the following amounts before initiation:					

Chapter officers will send air forms, properly filled in, to the National Secretary-Treasurer as soon as possible after election. The National Secretary-Treasurer will return the white sheet for the Chapter records. For full instructions see the inside cover of the record book.

Please print name			
Name CRAAN Last Name	EMMETT First Name	GAR Chapter Numb	er 1071
		5 State General Numb	er 1724
Home address 2/45 BUK	City City	KANSAS MEMBERSHIP State	: Active, Strike out one
Course ENGR. PHYS	ICS Class 952 Year of Gradu	Date of InitiationQCT2.	pproximate
Date of Birth AUG. 2 19.	3.0 Place of Birth A.	NSAS CITY K	4 NSAS State
Parent or Guardian's Name	HOWE Last Name	MRS. RALPH First Name	
Parent or Guardian's Address	2145 BURNETT	TOPEKA A	State
Chapter Historian Do not write below this line.		Owene 7 Chapter	M. Crowl President
Chapter President will collect fro	m Candidate the 55 wing omo	SA 110	\$4.00

#### MEMBERSHIP RECORD

Please print name			·
ame Corman	James	Charles Chap	ter Number 57
			28382
ollege addressStreet	City	State State	rai Number
-	P-L. L	O. Marie	MDCUID. Active Alexant
ome addressStreet	City	Pt MEMI State	Strike out one
ourse ME	(	Graduation date. 24	March 1969
		le fonte	
		City	State
arent or Guardian's Name	Last Name	Janes.	Int Name
	Last Name		
,		Ke hous hours	
arent or Guardian's Address	Street	Rebers burg	A Repson
Chapter Historian on not write below this line.	Street	Chylory	.,.,.,

Chapter officers will send all three forms, properly filled in, to the National Secretary-Treasurer as soon as possible after election. The National Secretary-Treasurer will return the white sheet for the Chapter records. For full instructions see the inside cover of the record book.

Ha	
Bancroft	
200	
Fraternity,	
Tau	
to Sigma	
8	
Ħ	
filled	•
Send ALL FOUR FORMS—Completely filled in to Sigma Tau Fraternity, 204 Bancroft Ha Nebraska, Lincoln, Nebr. 68508.	

DO	NOT	WELLE	Ш	7115	SPAG
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Chapter Number 9446

General Number 43222

#### SIGMA TAU FRATERNITY

#### PERMANENT MEMBERSHIP RECORD

Do not make carbon copy of this record—Print all four forms with ink.

Chapter EPS/40/V		School KANSA	s State Vi	VIVERSIEY
DATE OF INITIATION	NOU	12 1972	Date of Birth 02/2	2/50
Name CORMAN		Jo Hiv Frst Name	FRANKLIN	Middle Name
College address M-16 JAB	DINE TEAR.	MANGATTAN	KANS.	66302
Home address P /		BELVIT	State Kans	Zip Code 6 7 42 3
Street		City	State	Zip Code
Graduate Degree in		e (in which degree will be o		Year of Graduation  () Year of Graduation
ALUMNUS MEMBER Data: (	Engineering facul	ty or practicing enginee	er)	
Bachelor's Degree in	Course		School	Year Received
Master's Degree in	Course		School	Year Received
Doctor's Degree in	Course		School	Year Received
Chapter Historian	lin	Oct 201977  Date Signed	- Dana M Shap	neicht ter President

Chapter President will collect from each Candidate before initiation a fee of \$18.50 which shall include the cost of the key, the membership certificate, the Pyramid (2 years) and general service expense.

MEMBERSHIP RECORD 54 Date April 18,1963 Please print name Nuguio Chapter Number 2059 Last Name Middle Name College address 1635 Laxame Manhattan Hansas General Number 3230 Tescott Ramsos MEMBERSHIP: Home address R.F.D. Course Freetwical Engineering (1965) Initiation date May 7, 1963 If alumnus, give University and degrees..... Date of Birth 5-6-42 Place of Birth Tescott , Kawsos Parent or Guardian's Name..... Parent or Guardian's Address R.F.D. City Carrol Johnson Chapter Historian Chapter President Do not write below this line. Chapter President will collect from Candidate the following amounts before initiation:

orms, properly filled in, to the National Secretary-The National Secretary-Treasurer will return the white forms, election. Chapter officers will send all three soon as possible after Chapter records, For



Permanent record.-Do not make carbon copy of this record.-Print all forms with ink.

Shingle Pyramid Initiation

,	17 10 17 15 1	A A A A A A A A A A A A A A A A A A A		
Chapter LAMBDA	Institution UNIV. OF KA	AUSAS, LAWRENCE	KAN Date 26	OCT 1949
Please print name				0 -
Name CORMAN,	WILLIAM First Name	WARREN Middle Naz	Chapter Number	937
College address. Con				
Home address /8// N	•			Alamat
Course ARCH ENG	W. Class 195 Year of	O Date of In	itiation NOV. 17	1949 foximate
Date of Birth JULY 31, 1	926. Place of Birth. K	ANSAS CITY	KAN	JSAS State
Parent or Guardian's Name	Howe,	MRS.	MIRIAM First Name	
Parent or Guardian's Address.	2145 BURN	VETT RA	TOPEKA,	KAN, State
Chapter Historian Do not write below this line.		***	Can Capter Property	nident .
Chapter President will collect f	rom Candidate the followin	50 comounts before initiat	ion: 54.00 Initiation	\$4.00
Shingle 50 € Permanent re		on_copy of this record	Print all forms with in	nk.
	Total \$6.	UU		

			MEMBERSH	IP RECORD		
Chapter	Rho	Institution L	niv. of	Idaho	Date Nov. 2	4, 1952
	Please print name					
Name	Corn Last Name	Don First No		Eugene Middle Name	Chapter Number	478
College a	ddress Lind/&	y Hall	Moscow City	Ida ho		40000
Home ad	dress /8//-2 Street	nd St. S.	Nampa	Tdoha State	MEMBERSHIP:	Active, Henesary Strike out one
Course	Civil En	<i>gr.</i> cı	ASS 1953 Year of Gr	Date of Initiation	on Dec. 12	1952 eximate
Date of I	Birth April 2,	1932 Place	of Birth	Nampa	Idoho	State
Parent or	r Guardian's Name	Corn Last Name	1000-100 AAA 000 AAA 000 OO	Wm. E	First Name	
John	Chapter Historian rite below this line.	Eusa	2 nd 5 t. S	Namp	Chapter President	State
Chapter I	750	Key TAX	\$5.00	amounts before initiation by a state of this record.—Principle of this record.	10	54.00

Please print name.			
Name Harage Cosh	HAROLD	DEANE	Chapter Number 670
Last Name	First Name	Middle Name	Chapter Number
College address			General Number 944
Street	City	State	General Number
Home address // 40 NW 4/	Oklahoma Gis	to Okla.	MEMBERSHIP: Active Henera
Street	City	State	Strike out or
Course Biril Engineer	Class 194	Date of Initiation_	4/19/41
	Tour or o	Graduation	Approximate
Date of Birth June 1, 19		Salt Fork,	abla.
Date of Birth June 1, 19		0	Okla . State
		0	Okla State
		0	abla.
Parent or Guardian's Name		Salt Fork,	Okla State
Parent or Guardian's Name		0	Okla State
Parent or Guardian's Name	Place of Birth	Salt Fork, City	State State  First Name  Okla
Parent or Guardian's Name	Place of Birth	Salt Fork, City	State State  First Name  Okla
Parent or Guardian's Name  Parent or Guardian's Address  Emmt Guardian  Chapter Historian	Place of Birth	Salt Fork, City	State  First Name  Okla  State  State
Parent or Guardian's Name  Parent or Guardian's Address  Chapter Historian  Do not write below this line.	Place of Birth  Array Alice Last Name  Street	Salt Fork, City City	State  First Name  Okla  State  Chapter President
Parent or Guardian's Name  Parent or Guardian's Address  Chapter Historian  Chapter President will collect from 50c	Place of Birth  Array Alice Last Name  Street	Salt Fork, City City	State  First Name  Okla  State  Chapter President

#### MEMBERSHIP RECORD

Please print name.			
Name Corn	John Pirst Name	William	Chapter Number 653
college address 900 Broadw	ay Boulder	Colora do Colora	deneral Number 11, 47
Iome address 900 Broad	lway, Boulder	Colorado ,	MEMBERSHIP: Active, Henorar,
Chan 12.1 5		C	- 10 101-
ourse L. M. Empli	Year of Grad	Date of Initiation	Approximate
ate of Birth Oct. 28, 19	Year of Grad 20 Place of Birth D	Date of Initiation	Approximate  EX A.S.
ate of Birth Oct. 28, 193	20 Place of Birth D	70/1/as , T	EXAS Blate
ate of Birth Oct. 28, 195	20 Place of Birth D	04//45 City , T	EXAS  State  First Name
ate of Birth Oct. 28, 192  arent or Guardian's Name  arent or Guardian's Address  Chapter Historian	20 Place of Birth D	lainview-	EXAS  State  First Name

Permanent record. Do not make carbon copy of this record.—Print all forms with ink.

# MEMBERSHIP RECORD

Please print name				
Corracchio	Huseph	Vincent	Chapter Number	. 1180
Last Name	First Name	Middle Name		00
ege address Box 836	Netany 20 Un	vuersity Park. Pa	General Number	2214
	City	State		Ale
e address 7.0	Horsche	ads N.Y.	MEMBERSHIP:	Active.
Street	City	State		Strike out o
re Electrical Eng	VA CETING Class 195	Date of Initiatio	May 16	1955
0	Year o	f Graduation	-App	roximate
Dec. 27 19	34 Place of Birth	New York City	N	14
or Birtil	tace of bit tu	City		State
	Pomacchio	Vin	cont	
ent or Guardian's Name	Last Name		First Name	**************
	-2 - t	March and		110
ent or Guardian's Address.		Horse head.	5	1/21.
•	Street	City	) 11	State .
W.I. Cithuran	<b>&gt;</b>		aul Mar	nuck
Chapter Historian not write below this line.			Chapter Pr	resident
not mure peron time ime.				

Permanent record.-Do not make carbon copy of this record.-Print all forms with ink.

#### MEMBERSHIP RECORD

		Institution Univer	sity of ox	lahoma :	Date Nos. 2	5,1935
Name	Corneil	Hampto First Name	n Ga	askill	_Chapter Number	452
	Last Name	First Name	1/ 200 0	Middle Name	,	661
College ac	ddress 430 Etree	ahema N	forman, a	State State	General Number	
Home add	iress 833	Lipscomb S	treet, Aut	state  State	O MEMBERSHIP:	Active Henorius, Strike out one
Course	etroleum R	efining Eng. Class	1936 Day	te of Initiation	Dec. 18	1935
Date of B	irth Feb. 11	1914 Place of	Birth 5f.	Olty	6., Mis	State
Parent or	Guardian's Name	Cornel /	/	A.N.	First Name	
Parent or	· Guardian's Addre	988 833 LIP -	scomb	Amar A	1/1/0, 7	exas. State On
James	Chapter Histo	L orien		Jo	Chapter Presiden	land on
Chapter I	President will colle	ect from Candidate the following S4.	llowing amounts be	fore initiation:	\$4	í.00

PERMANENT RECORD.—DO NOT MAKE CARBON COPY OF THIS RECORD.—PRINT ALL FORMS WITH INK.

#### MEMBERSHIP RECORD

Chapter_	DELTA Ins	titution S.D. S.		Date 14 A	01.1949
	Please print name  CORNE JO	WALTER	CARLOS	Chapter Number.	102
Name	Last Name	First Name	Middle Name		
G-11	address 1402, 6#2 5	dr. BROOKINGS	S.D.	General Number.	14944
College	address Street	City	State		
Home ad	Idress Av. ARMENDAR	12#220 MIRAFLORES	LIMA-PERU	MEMBERSHIP:	Active, Henerary
Home we	Street	City	State		Strike out one
Course	MECH. ENG.	Class 1950	Date of Initiatio	.26 Apr.	1949
Course		Year of Grad	luation	Appi	roximate
Data of	Birth JUNE 30, 19	26 Place of Birth	HEIDELBERG	GER	MANY
Date of	DIT CH	position of the second	City		State
<b>*</b>	on Guardiania Nama	CORNEJO		GUILLERMO	0
Parent o	or Guardian's Name	Last Name	First Name		
m	Chap of Historian write below this line.	SAME AS "HOME Street	City L. U	Chapter President	State dent
Chapter Shingle	50c	Tax = 1.00	Pyramid 54	Initiation	\$4.00
	2 Os Indianas 1000	Total \$6.00			

Chapter officers will send a

#### MEMBERSHIP RECORD

Please print name	1 COH
Iame CORNELIUS, ARCHIE J. Chapter 1 Last Name First Name Middle Name	22675
Last Name  First Name  Middle Name  Sollege address 23 C ELLIOT CTS MANHATTAN, KANSAS General 1  Street  City  State	Number 20010
Street City State	Strike out one
Course MECH, ENGR (1958) Initiation date 15 N	or 1956
f alumnus, give University and degrees	
ate of Birth 16 OCT 1931 Place of Birth WESTMORELAND, KA	VSA.S
ate of Birth 16 OCT 1931 Place of Birth WESTMORELAND, KANDARENT OF Guardian's Name CORNELIUS ARCHIE	NSA,S
Parent or Guardian's Address 11.06 KEARNEY, MANHATTAN KANSAS	NSA.S. State
Parent or Guardian's Name.  CORNELIUS, Last Name  Parent or Guardian's Address 1/06 KEARNEY,  Chanter Historian  A degrees.  Chanter Historian  A degrees.  Control Birth.  Last Name  Control  Chanter Historian  Control  Control	NSA.S. State
Date of Birth. 16. OCT 1931. Place of Birth. WESTMORELAND, KA.  City  Parent or Guardian's Name. CORNELIUS, ARCHIE  Last Name  Parent or Guardian's Address 11.06. KEARNEY, MANHATTAN, KANSAS.  Street  Street  Street	State  State  State

Chapter officers will send all three forms, properly filled in, to the National Secretary-Treasurer as soon as possible after election. The National Secretary-Treasurer will return the white sheet for the Chapter records. For full instructions see the inside cover of the record book.

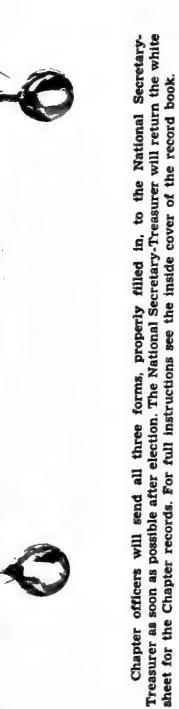
Control of the second

#### MEMBERSHIP RECORD

Please print name				71.
Land Atlanta	E EL EU EVENINA	Middle Name		*
ollege address 227 E. Street	St. Per , RAPID.	Ger State	eral Number	7046
		MED State		
the tribute to the size	rring (	1960 ) Initiation date	ARCH 1. 195	ç
ourse	Year	r of Graduation		
		r of Graduation		
alumnus, give University and	degrees			**************
alumnus, give University and the of Birth. THN. 28, 12	3.2 Place of Birth		State	****************
alumnus, give University and ate of Birth. I.A.M. 28.,	degrees	Selvery Isalis is S	State First Name	
alumnus, give University and ate of Birth. FAN. 28.,	degrees	5 (170.00 g. 15.00.17.5 ts.) City	State  State  First Name  S. Dryk.  State	
alumnus, give University and ate of Birth. I.A.M. 28.,	degrees.  3.9 Place of Birth  CORING ALES IAST Name  9.9.9.5. PRA	Selver Sulver City	State  First Name  State  Chapter President	

Chapter officers will send all three forms, properly filled in, to the National Secretary-Treasurer as soon as possible after election. The National Secretary-Treasurer will return the white sheet for the Chapter records. For full instructions see the inside cover of the record book.

	BERSHIP RECORD		
Chapter Omega Institution Unive	ersity at Wyomic	19 Date Nove	B, 1961
Please print name			,
Name Cornelius George Last Name First Name	Francis	Chapter Number	82.8
College address 410 E 9th St. Che	ELENNE. WYD.	General Number	302.90
Home address GIO L 4th 5t he Street City	state  Venue (1/40-	WWWDWDGDTD.	Antiro Alexant
Course EE	1943 ) Initiation d	ate Nov. 12,	1961
If alumnus, give University and degrees	***************************************	***************************************	
Date of Birth Sec 27, 1988. Place of Birth.	Kearney	Nebrask	<u> </u>
Parent or Guardian's Name.		Carl	State
Parent or Guardian's Address 1810 7 th	Ave Kear	First Name	eska
18 ber Villale	City	John &	State O State
Chapter Historian Do not write below this line.		Chapter Pre	eident
Chapter President will collect from Candidate the follow	wing amounts before initiation	:	
ShingleKeyRey			



Please print name			
ama Cornelius	Kenneth T.	hompsom Cha Middle Name	nter Number 64
Last Name	First Name	Middle Name	04040
ollege address		Gen.	eral Number 21948
Street	City	State	A.
ome address 1.3 / 8. Street	35-th St. N.W.	Washda MEM State	BERSHIP: Active, Strike out one
M.F.	Class 195	Date of Initiation.	oril 28 1955
<b>V 18.5 - 17.</b>	Year of (	Graduation	Approximate
ate of Birth 11/24/2	4 Place of Birth	st. Louis, Ma	
arent or Guardian's Name	Cornelius Last Name	Mar	first Name
arent or Guardian's Name	Cornelius Last Name	Mar	first Name
arent or Guardian's Name	Cornelius Last Name	St. N.W. Wash	First Name
arent or Guardian's Name	Cornelius Last Name	Mar	First Name
arent or Guardian's Name	Cornelius Last Name  1318 35-th Street  Kenney	St. N.W. Wash City Depri	Itest Name  State  Color Color
arent or Guardian's Name	COYNE I US Last Name  1318 35-th Street  Knys	St. N.W. Wash City Depri	Chapter President

Deceased mar 21, 1955

# SIGMA TAU FRATERNITY

#### MEMBERSHIP RECORD

Chapter	Institution T of - In- C.B.	br.	Date
College Address  Home Address  Last Name.  Last Name.  Last Name.	First Name.  City.  Lincoln  Longbooky, Lonington	, Nobeste.	General Number 24  Membership Active Heneral Strike out one.
			Approximate
Date of Birth	Place of Birth	City.	State.
Parent or Guardian's Name			
1	Last Name.		First Name.
Parent or Guardian's Address	Street.	City.	State.
Chapter Historian. Do not write below this line.			Chapter President.
Chapter Treasurer will collect from (			
Shingle Key	PJ	ramid	Initiation



send all three forms, properly filled in, to the Grand Secretary-Treas-after pledging. The Grand Secretary-Treasurer will return the white cords. For full instructions see the inside cover of the record book.



#### MEMBERSHIP RECORD

		MEMDERSA	IF RECORD		
Chapter PHI	Institution	UNIVERSITY	OF AKRON	Date MARCH	10,1938
Please print nam	e.				
Name CORNELL	Do	NALD	HERBERT	Chapter Numb	94
Last Name	1	irst Name	Middle Name		
College address 841	BERWIN S	T. AKRON	OHID	General Numb	T 7727
	Street	City	State	000000000000000000000000000000000000000	
Home address 841	BERWIN S	T. AKRON	OHID	MEMBERSEI	P: Active <del>Honorar</del>
	Street	City	State		Strike out one
Course MECHANI	CAL ENG.	Class / 9 3 S			25,1938 proximate
Date of Birth DEC.	26,1915	Place of Birth	AKRON		OH10.
			City	,	State
Parent or Guardian's N	CORNE	LL		DONALD	
tatent or Agardian 9 11		st Name	* * * * * * * * * * * * * * * * * * * *	First Name	
Parent or Guardian's A	ddress 841	BERWIN !	ST AKRON	0	DHID
052	u. F.	Street	City O	11/2	State
Chanter	Historian	gan minga oroningiganiligi		Chapter Pres	ident
Do not write below this					
Chapter President will	collect from Cand	idate the following	amounts before initiation	ı:	e
Shingle 30	<u>)</u> Кеу	\$5.00	Pyramid 400	Initiation	700

PERMANENT RECORD-DO NOT MAKE CARBON COPY OF THIS RECORD-PRINT ALL FORMS WITH INK.

Name Cornell John W. Ur.	Chapter Number 00184
College Address — Home First Name.	1010
	Membership Active Honoras
Course CIVIL Eng. Class 1922 Date of Initiation  Year of Graduation.  Date of Birth Aug 16-1899 Place of Birth Philadel  City.	phia Penna.
Parent or Guardian's Name Of Nell John VV NITIN	$\mathcal{G}$
Parent or Guardian's Address 725 Vernon Rd. Phila. Pe	Pirst Name.
ashly B. Paul Street. Walter E.	L. I rwin
Chapter Historian.  Do not write below this line.	Chapter President.

	MEMBERS	SHIP RECORD		
Chapter Magaa Institu	tion Tanna State	College	Date /2/	1/38
Please print name		-		
Name LOTTICY Last Name	Arthur First Name	Nationiel Middle Name	. Chapter Number.	470
College address JO3 Free Street	bll The Coll	oe B. State		
Home address 217 Gipson	St. For Fock	State	MEMBERSHIP:	Active Henoral Strike out one
Course Ind. Eng.	Class 1939 Year of Graduati	Date of Initiation	Jan. 111	•
Date of Birth Aug. 13, 1918	Place of Birth	anton, City	Pa.	State
Parent or Guardian's Name		~~54 assessans.netaaassassassassassassassassassassassassa	Ben jima	2
Parent or Guardian's Address.	7 Gipson St. 10	Trackoway of	LL. NI	Y
Robert & Bogo Chapter Historian			Elward	State
Do not write below this line.			Chapter Presid	ent
Chapter Treasurer will collect from				\$4.00
Shingle Ke	55.00	Pyramid \$4.0	O Initiation	***
	PERMANENT RECORD-	PLEASE PRINT WITH INK		

<b>A</b> H	
9/	Chapter Upsilon Institution University of Fla
National	10 Det
Nat	Please print name
the	Jonald
in, to	Name Water Control of the Control of
₫ <del>(</del>	8
filled	College address 288-1 Corry Calveville Fld.  Street City  Home address Daland, Fld. or Windower, Ky  Street City  State  Course Course City  State  Membership: Active, Alexandress  State  Course Course City  State
ri'y	
properly filled	Course (1) Engineering (1967)  Year of Graduation Initiation date Nov. 16, 1962  If alumnus, give University and degrees.
_ Z	
form	
e e	Date of Birth 2-27-37 Place of Birth Wendower V
	A SIA TIME
nd all	Parent or Guardian's Name OTHET
Die ig	Parent or Guardian's Add
will	Parent or Guardian's Address Gen Del. Wendover Ku
cers n as	State State
0 FE	Do not write below this line.
pter er as r the	Chapter President
Chapt Treasurer	Chapter President will collect from Candidate the following amounts before initiation:
Tre	Key.
	Permanent record.—Do not make carbon copy of this record.—Print all forms with ink.
A Republican Charles	Front all forms with ink.

# Chapter officers will send all four forms — properly and completely filled in — to the National Secretary-Treasurer as soon as possible after election. The National Secretary-Treasurer will return the white form for the Chapter's permanent records

# SIGMA TAU FRATERNITY

### PERMANENT MEMBERSHIP RECORD

Do not make carbon copy of this record - Print all four forms with ink.

DATE OF INITIATION 4-27		New Mexico		
		/22045/6	or Alumnus) 1cT	I. J. C.
Last Name	Frank First Name	Nolan Middle Name	Chapter Number	736
College address $\beta_{\varrho} \times 3/7/$	Unix. P.	k. N. M.	General Number	39475
Home address Box 462	Bloom field	J N, M State		
Street	City	Staté	Zip Code	
ACTIVE MEMBER Data: B.S. Degree	in E, E.			1 70
LUMNUS MEMBER Data:		in which degree will be grant	ed)	Year of Graduation
B.S. Degree in				or or addation
	Course	School		
M.S. Degree in		***************************************		Year Received
Ph.D. Degree in	Course	School		Year Received
208.00 11	Course	Cabaal	D	()
Pate of Birth 2-26-49		School		Year Received
	Place of Birth Lul	bock	Tex	A.S.
		City	S	itate
ame of Parent or Guardian Lo	INETT	F .		
	Last Name	First Name	Mid	die Name
	Last Name	First Name  Bloom fie	W N Mid	dle Name 87413
ame of Parent or Guardian & oddress of Parent or Guardian & Barre Chapter Historian	Last Name	Bloom fie,	11 N, Mid	die Name 87413

Chapter President will collect from each Candidate before initiation a fee of \$18.50 which shall include the cost of the key, the membership certificate, the Pyramid (2 years) and general service expense.

Please print name			
Name CORNEIT	First Name	WYLLE Ch	apter Number 1453
College address 1606 FAII		prate	
Home address R & Street	NEODESH	State	MBERSHIP: Active, Strike out one
Course AGR. ENGS	Class Jr. Vear of C	Date of Initiation	Nov. 9 54 Approximate
Date of Birth APRIL 7, 3	ZPlace of Birth	TERE EDRD City	TEXAS State
arent or Guardian's Name	CONNETT		Pirst Name
earent or Guardian's Address	Street	City	State  State
Chapter Historian on not write below this line.		Bug	Chapter President
hapter President will collect from	Candidate the following s	mounts before initiation:	

Please print name		OCCUEGE OF A&MADate	
CORNEY	MARTIN	None Chapter	F 1
Last Name	First Name	Middle Name Chapter	Number 2
ollege address. Box 454	STATE COLL	ESE NEW MEXICO General	Number 5647
ome address 3201 CARLISL	E AJ. BALTIMOR	State LE 16 MARYLAND MEMBEI	RSHIP: Active.
UTBE MECHANICAL ENGINEE	Class 195	Date of Initiation 6	Nov. 1949
te of Birth 16 FEB 192	-6 Place of Birth R	ROOKLYN NEW	Approximate  York
		RAE & JOSHUA P.	C14 - 4 -
		AU. TATHORE -16-	
Richard Du 2  Chapter Historian  not write below this line.	t.on.	Millan	State
apter President will collect from	Candidate the following am	ounts before initiation:  Pyramid \$4.00 Init  Opy of this record.—Print all forms	\$4.00
	J	Pyramid	latton

Please print name	
Name CORNFORTH, KOBERT C. Last Name First Name	Middle Name (1860)
College address 1805 W. April 24 Rd. ; Same	WATER, OKIA, General Number 33231
Home address 2436 N.W. 38TH OKLA CITY,	OKLA MEMBERSHIP: Active, Alumni State Strike out one
Course ARCHITECTURAL ENGR. (1961 Year of Gradua	
If alumnus, give University and degrees. BS 1961,	
Date of Birth 18 FEB 37 Place of Birth GUINI	RIE OKLA. State
Parent or Guardian's Name CORNEORTH, L. C	<b>7</b>
Parent or Guardian's Address 2436 N.W. 38Th	
Jerry Dual Street	Charles Hestond
Chapter Historian	Chapter President
Do not write below this line.	

t Hall, Univers	- Pacce
R FORMS.—Completely filled in to Sigma Tau Fraternity, 204 Bancroft Hall, University, Nebr. 68508.	a december
ty, 204 B	Chonton's
Fraterni	for the
a Tau	ACTION A
Sigm	-
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SIGMA	TATI	FRATERNITY	7
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# Chapter Number 2473

PERMANENT MEMBERSHIP RECORD

General Number 42128

DO NOT WRITE IN THIS SPACE

Do not make carbon copy of this record-Print all four forms with ink.

Chapter 4477 + KA	PF4 School P	ENN STATE UNIV	
DATE OF INITIATION	15/71	Date of Birth 3/30/	/ <sub>50</sub>
Name CORNHILL	DENNIS TH	OMA S	Middle Name
College address 145 M	J. PROSPECT S	TATE COLLEGE PA	(680 ) Zip Code
Home address SAMC	City	State	Zip Code
ACTIVE MEMBER Data: (Und	ergraduate and graduate studer	nts)	
Bachelor's Degree in EA	Course (in which degree	ee will be or was granted)	( 1972 ) Year of Graduation
Graduate Degree in	Course (in which d	legree will be granted)	Year of Graduation
	Engineering faculty or practicing		
Bachelor's Degree in	Course	School	Year Received
Master's Degree in	Course	School	Year Received
Doctor's Degree in	Course	School	Year Received
Robert E. and Chapter Historian	erson 14/1/7/	Signed M. M. B. M. Cha	pter President

Chapter President will collect from each Candidate before initiation a fee of \$18.50 which shall include the cost of the key, the membership certificate, the Pyramid (2 years) and general service expense.



MEMBERSHIP RECORD Chapter ALPHA GAMMA Institution New Mexico AEMA. Date OCTOBER 14, 1955 Please print name Name CORNING HAROLD
First Name 1140MAS Chapter Number 207 College address 616 West Picacho Las Guces, New Mexico General Number Home address 3920 Chester EL PASO TEXAS MEMBERSHIP: Active Atomic Strike out one Course MECHANCAL ENGINEERING (1956) Initiation date. NOV 1 1955 If alumnus, give University and degrees..... Date of Birth October 5, 1929 Place of Birth EL PASO TEXAS MIEMIS CORNING GEORGE Parent or Guardian's Name. 3920 CHESTER EL PASO Chapter Historian Do not write below this line. Chapter President will collect from Candidate the following amounts before initiation:



\$5.00

Universi	ababaa.
Hall,	a treat
Bancroft	A TAPPED
204	-
ALL FOUR FORMS—Completely filled in to Sigma Tau Fraternity, 204 Bancroft Hall, University Lincoln, Nebr., 68508.	
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LL FOUR FORMS-Completely filled in to Sigma Tau Fraternity, 204 Bancroft Hall, University aska, Lincoln, Nebr. 68506.	Contract of the second of the
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		- /. K	-

DO NOT WRITE IN THIS SPACE

Chapter Number 60 7

#### SIGMA TAU FRATERNITY

#### PERMANENT MEMBERSHIP RECORD

Do not make carbon copy of this record-Print all four forms with ink.

Chapter Delta	School South Da	akota State (	University
DATE OF INITIATION	May 21, 1972 1	Date of Birth Jan	15 1933
Name Corothers	Jamas Frst Name		erome
College address Street Home address	City	State South Dake State	Zip Code fq 57126 Zip Code
	rgraduate and graduate students)  -   ectrica   Enginee  Course (in which degree will be or		Year of Graduation Year of Graduation
ALUMNUS MEMBER Data: (E	ngineering faculty or practicing engineer		
Bachelor's Degree in	Course	School	Year Received
Bachelor's Degree in	Course	School School	Year Received  Year Received  Year Received
_	Course		

the membership certificate, the Pyramid (2 years) and general service expense.

	RSHIP RECORD
Chapter Epsilon Institution Inansas	State University Date Oct 27, 1962
Please print name	
Name Ovastria Henneth	Middle Name Chapter Number 2020
College address 1965 College Heigts	Manhattan Kandeneral Number 31505
Home address.  Street City	/Sans MEMBERSHIP: Active, Alumni
If alumnus, give University and degrees.	Graduation date Alou, 29 1962
	Tipton Hone
Parent or Guardian's Name Corp 5 1 Time	State  L + O  First Name
Parent or Guardian's Address.  Street	7. ptom Kans
Do not write below this line.	Chapter President
Chapter President will collect from Candidate the following a	mounts before initiation:
ShingleKeyReyReyReyReyReyReyReyReyReyReyReyReyReyReyReyReyRey	Pyramid

Chapter officers will send all three forms, properly filled in, to the National Secretary-Treasurer as soon as possible after election. The National Secretary-Treasurer will return the white sheet for the Chapter records. For full instructions see the inside cover of the record book.

Please print name			
Name CORR	TERRY	LYNN Cha	nton Number -20.65
ollege address GOODA	DOW HALL B	200M 516 Gen	eral Number 32592
	//////	7/7 ( / /7/ U / A. S. DOME	
ome address	V/OLA City	KANSAS MEM State	BERSHIP: Active, Aluma
ourse ELEC. ENGG.	, 196	5	Strike out of
alumnus, give University and	degrees		
alumnus, give University and ate of Birth NOV. 9, 1942	degrees	City	KANSAS State
alumnus, give University and eate of Birth NOV. 9, 1942	degrees	City C	KANSAS State
f alumnus, give University and Date of Birth NOV. 9, 1942 Parent or Guardian's Name	Place of Birth  CORR  Last Name	City City	ERALDE.
f alumnus, give University and Date of Birth NOV. 9, 1942 Farent or Guardian's Name	Place of Birth  CORR  Last Name  RRJ	City City	ERALDE,  Irst Name  KANSAS  State
ate of Birth NOV. 9, 1942	Place of Birth  CORR  Last Name  RRJ	City City	ERALDE,  Tret Name  KANSAS
ate of Birth NOV. 9, 1942  arent or Guardian's Name	Place of Birth  CORR  Last Name  RRJ  Street	City City City City City City	KANSAS  State  ERALDE,  Irst Name  KANSAS  State  Thornada

# to the National

# SIGMA TAU FRATERNITY

# PERMANENT MEMBERSHIP RECORD

Do not make carbon copy of this record - Print all four forms with ink - Do not type.

DATE OF INITIATION	KAPPA School	FRESNO STATE C	CLECE
Last Name  College address 2255  Stree  Home address 177 N. P	First Name  E.SHAW FRESA  Cit  OWERS MANT	MEMBERSHIP (Active or Alumn  SAMES Chapt  Middle Name  CALIFORNIA Gener  State  CALIF 95	er Number 74 al Number 36923
ALUMNUS MEMBER Data: B.S. B.S. Degree in		CIVIC CNC INCE YE	Year of Graduation
M.S. Degree in	Course	School	Year Received
Ph.D. Degree in	Course	School	Year Received
	Course	School  OARTINEZ CAS	Year Received
or ratent of Guardian	CORCEA	TAMES	State
Chapter Historian	Da Da	First Name  PANTECA  City  Howard  Ste Signed	State R. Pouker
Chapter President will collect from	om Candidate the following amo Shingle: \$1.00; Key: \$	ounts before initiation: \$3.50; Pyramid (2 years): \$3.00; National	

# to the National

# SIGMA TAU FRATERNITY

# PERMANENT MEMBERSHIP RECORD

Do not make carbon copy of this record - Print all four forms with ink - Do not type.

Chapter ETA Sch	hool WASHINGTON STATE UNIVERSITY
Name CORRELL JAMES	MEMBERSHIP (Active or Alumnus) ACTIVE  STOBB Chapter Number 1714  Pullman Name
College address 1800 1 C" ST.	Middle Name Chapter Number 1714
Home address 830 12th ST., CL	ARKSTON WASH 99453
	ENGINEER ALC
ALUMNUS MEMBER Data:  B.S. Degree in	Course (in which degree will be granted)  Year of Graduation
M.S. Degree in	School (
Ph.D. Degree in	School Year Received
Date of Birth 11-1-96	School ()
Name of Parent or Guardian CORRELL	CONG BEACH CALIFORNIA
Name of Parent or Guardian CORRELL Last Name Address of Parent or Guardian 830 127h	First Name  Middle Name
Grapher Historian Street	First Name  ST. GLARKSTON, WASH.  City  State  Middle Name  Middle Name  City  State  Chapter President
Chapter President will collect from Candidate the following : Shingle: \$1.00: Ke	
2gie. \$1.00; Ke	amounts before initiation: ey: \$3.50; Pyramid (2 years): \$3.00; National Records: \$11.00; Total: \$18.50.

# completely filled in -- to the National Chapter officers will send all four forms — properly and completely Secretary-Treasurer as soon as possible after election. The National Secretary-Treasurer will return the white form for the

# SIGMA TAU FRATERNITY

# PERMANENT MEMBERSHIP RECORD

Do not make carbon copy of this record - Print all four forms with ink - Do not type.

Chapter Jota  DATE OF INITIATION	*******************************	School Unit	verest.	h ink — Do not type	ž.
DATE OF INITIATION	April 22	1.		-olorado	
Nome		MEM	Danas		clive
College address /402 - 7	First Name	*****************************	Mann		******************
Last Name  College address 1402 - B  Street  Home address Street	235 51	Boulder	Middle Name	Canana Tanana	1963
Street		,	State	General Number	35421
ACTIVE MEMBER Data: B.S. De	arron in Fh.7	City	State	80302	or a grant of the state of the
ALUMNUS MEMBER R	gree in Clectri	ical Enginee	erina	Zip Code	
ACTIVE MEMBER Data: B.S. Deg ALUMNUS MEMBER Data: B.S. Degree in. M.S. Degree in.		Course (if which d	egree will be granted)		(
M.S. Degree in	Course	*************************			of Graduation
Ph.D. Degree in	Course		School	***************************************	Year Received
	Course	********	School	******************************	(**************************************
Date of Birth 11/13/30	course		School	(** ### #### #### #### ### ### ### ### #	Year Received
Vame of Dansel	Place of Birth.	Sult Lake	· Ct.		Year Received
Name of Parent or Guardian			City	u	41
address of Parent or Guardian	Last Name	Fir	st Name	Sta	ite
Vincent Goshi	Street	***************************************	vame	Middl	e Name
Chapter Historian	M	arch 25 '	City		
hapter President will		Date Signed	6 Leslie	Besser	•
Chapter Historian  Chapter President will collect from Ca	andidate the following Shingle: \$1.00: 1	ng amounts before	initiation	Chapter President	************************
	Amin's wa	rey: \$3.85; Pyramid	(2 years) 34.50: N	Vational Records \$10.65;	
Militaria de Caración de Carac			\$3.00;	Ational Records	15; Total 150
TOTAL MAN				\$10.09;	\$18.50.